# Complete Summary

## TITLE

Depression: percent of clinically significant depression patients who have had a documented follow-up 1 to 3 weeks after their last New Episode Patient Health Questionnaire (PHQ).

# SOURCE(S)

HDC topics: depression. [internet]. Rockville (MD): HRSA Health Disparities Collaboratives; 2005[cited 2005 Mar 31]. [9 p].

#### Measure Domain

## PRIMARY MEASURE DOMAIN

## **Process**

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the <u>Measure Validity</u> page.

## SECONDARY MEASURE DOMAIN

Does not apply to this measure

#### **Brief Abstract**

# **DESCRIPTION**

This population-based measure is used in primary care settings to assess the percent of clinically significant depression\* patients who have had a documented follow-up 1 to 3 weeks after their last New Episode Patient Health Questionnaire (PHQ)\*\*.

Early clinical follow-up is helpful to monitor early adherence and early side-effects which might lead to non-adherence (Katon W, et al., JAMA 1995).

Note: The universe of patients (denominator) for this measure is limited to the last 12 months, This enables monitoring of changes in performance in the last 12 calendar months on a continuing basis.

<sup>\*</sup>Clinically significant depression = Patient with a diagnosis of depression and a New Episode PHQ of 10 or greater

\*\*New Episode PHQ = The PHQ measurement item that is used to track the PHQ results at the beginning of a depressive episode

# RATIONALE

Depression is one of the most common chronic illnesses in the United States, with a one-year prevalence rate of 5-6 percent. Depression is twice as common in women as in men; it is estimated that 20 percent of women and 10 percent of men will have an episode of major depression at some point in their lives. Depression often takes a severe toll on the physical and social functioning of those who suffer from it. According to one study using the SF-36 quality-of-life measure, depression impaired social functioning more than any other chronic illness, including arthritis, diabetes, congestive heart failure (CHF), angina, and hypertension; and impaired physical functioning more than any other chronic condition except the cardiac illnesses.

Depression care in the United States is even more fragmented than care of other chronic illnesses, creating a major gap between the recommended guidelines for care and actual care. It is estimated that only 19 percent--fewer than 1 in 5--of people with depression who see their primary care provider receive appropriate, guideline-based care.

Improving depression care is not only a matter of meeting the typical challenges of providing good chronic illness care--following people over time rather than responding to acute episodes, providing systematic follow-up to ensure that patients adhere to treatment plans, and so on. In addition, depression care brings its own complex set of challenges, ranging from underdiagnosis to financial disincentives for providers to special treatment requirements because the underlying nature of the illness frequently undercuts patients' ability to be effective managers of their own care.

This measure is one of 8 additional recommended measures in the HRSA Health Disparities Collaborative for Depression; participants choose to track at least one of these measures. Participants also track 5 measures for the Depression Collaborative.

## PRIMARY CLINICAL COMPONENT

Clinically significant depression; early follow-up; Patient Health Questionnaire (PHQ)

# DENOMINATOR DESCRIPTION

All clinically significant depression\* patients with a New Episode Patient Health Questionnaire (PHQ)\*\* within the last 12 calendar months

<sup>\*</sup>Clinically significant depression = Patient with a diagnosis of depression and a New Episode PHQ of 10 or greater

<sup>\*\*</sup>New Episode PHQ = The PHQ measurement item that is used to track the PHQ results at the beginning of a depressive episode

## NUMERATOR DESCRIPTION

All clinically significant depression\* patients with follow-up 1 to 3 weeks after their last New Episode Patient Health Questionnaire (PHQ)\*\*, and last New Episode PHQ is within the last 12 calendar months

\*Clinically significant depression = Patient with a diagnosis of depression and a New Episode PHQ of 10 or greater

\*\*New Episode PHQ = The PHQ measurement item that is used to track the PHQ results at the beginning of a depressive episode

# Evidence Supporting the Measure

# EVIDENCE SUPPORTING THE CRITERION OF QUALITY

- A formal consensus procedure involving experts in relevant clinical, methodological, and organizational sciences
- One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

# Evidence Supporting Need for the Measure

# NEED FOR THE MEASURE

Unspecified

#### State of Use of the Measure

# STATE OF USE

Current routine use

# **CURRENT USE**

Collaborative inter-organizational quality improvement Internal quality improvement

#### Application of Measure in its Current Use

# CARE SETTING

Ambulatory Care Behavioral Health Care Community Health Care

# PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

**Physicians** 

Psychologists/Non-physician Behavioral Health Clinicians

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

**Group Clinical Practices** 

TARGET POPULATION AGE

Age greater than or equal to 18 years

TARGET POPULATION GENDER

Either male or female

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

# Characteristics of the Primary Clinical Component

# INCIDENCE/PREVALENCE

See "Rationale" field.

ASSOCIATION WITH VULNERABLE POPULATIONS

See "Rationale" field.

**BURDEN OF ILLNESS** 

See "Rationale" field.

**UTILIZATION** 

Unspecified

COSTS

Unspecified

Institute of Medicine National Healthcare Quality Report Categories

**IOM CARE NEED** 

Living with Illness

IOM DOMAIN

#### Data Collection for the Measure

# CASE FINDING

Users of care only

# DESCRIPTION OF CASE FINDING

All clinically significant depression\* patients with a New Episode Patient Health Questionnaire (PHQ)\*\* within the last 12 calendar months

- \*Clinically significant depression = Patient with a diagnosis of depression and a New Episode PHQ of 10 or greater
- \*\*New Episode PHQ = The PHQ measurement item that is used to track the PHQ results at the beginning of a depressive episode

# DENOMINATOR SAMPLING FRAME

Patients associated with provider

# DENOMINATOR INCLUSIONS/EXCLUSIONS

## Inclusions

All clinically significant depression\* patients with a New Episode Patient Health Questionnaire (PHQ)\*\* within the last 12 calendar months

- \*Clinically significant depression = Patient with a diagnosis of depression and a New Episode PHQ of 10 or greater
- \*\*New Episode PHQ = The PHQ measurement item that is used to track the PHQ results at the beginning of a depressive episode

Exclusions Unspecified

# RELATIONSHIP OF DENOMINATOR TO NUMERATOR

All cases in the denominator are equally eligible to appear in the numerator

# DENOMINATOR (INDEX) EVENT

Clinical Condition
Diagnostic Evaluation

# DENOMINATOR TIME WINDOW

Time window precedes index event

# NUMERATOR INCLUSIONS/EXCLUSIONS

# Inclusions

All clinically significant depression\* patients with follow-up 1 to 3 weeks after their last New Episode Patient Health Questionnaire (PHQ)\*\*, and last New Episode PHQ is within the last 12 calendar months

\*Clinically significant depression = Patient with a diagnosis of depression and a New Episode PHQ of 10 or greater

\*\*New Episode PHQ = The PHQ measurement item that is used to track the PHQ results at the beginning of a depressive episode

Exclusions Unspecified

# MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

NUMERATOR TIME WINDOW

Fixed time period

DATA SOURCE

Special or unique data

LEVEL OF DETERMINATION OF QUALITY

Individual Case

PRE-EXISTING INSTRUMENT USED

Patient Health Questionnaire (PHQ)

#### Computation of the Measure

**SCORING** 

Rate

INTERPRETATION OF SCORE

Better quality is associated with a higher score

# ALLOWANCE FOR PATIENT FACTORS

Unspecified

STANDARD OF COMPARISON

Internal time comparison Prescriptive standard

PRESCRIPTIVE STANDARD

Greater than 70%

EVIDENCE FOR PRESCRIPTIVE STANDARD

HDC topics: depression. [internet]. Rockville (MD): HRSA Health Disparities Collaboratives; 2005[cited 2005 Mar 31]. [9 p].

## **Evaluation of Measure Properties**

## EXTENT OF MEASURE TESTING

Unspecified

## Identifying Information

ORIGINAL TITLE

CSD patients with documented early follow-up of last New Episode PHQ.

MEASURE COLLECTION

HRSA Health Disparities Collaboratives Measures

MEASURE SET NAME

HRSA HDC Depression Collaborative Measures

**SUBMITTER** 

Health Resources and Services Administration

**DEVELOPER** 

HRSA Health Disparities Collaboratives: Depression Collaborative

**ADAPTATION** 

Measure was not adapted from another source.

# RELEASE DATE

2002 Jan

## **REVISION DATE**

2005 Jan

# **MEASURE STATUS**

This is the current release of the measure.

# SOURCE(S)

HDC topics: depression. [internet]. Rockville (MD): HRSA Health Disparities Collaboratives; 2005[cited 2005 Mar 31]. [9 p].

# MEASURE AVAILABILITY

The individual measure "CSD patients with documented early follow-up of last New Episode PHQ," is available from the <u>Health Disparities Collaboratives Web</u> site.

# COMPANION DOCUMENTS

The following is available:

• Institute for Healthcare Improvement. Health Disparities Collaboratives changing practice, changing lives: depression training manual. Cambridge (MA): Institute for Healthcare Improvement; 2002. 89 p. This document is available in Portable Document Format (PDF) from the <a href="Health Disparities">Health Disparities</a> Collaboratives Web site.

# NQMC STATUS

This NQMC summary was completed by ECRI July 27, 2005. The information was verified by the measure developer on May 22, 2006.

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